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# TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number	09/771,328
Filing Date	January 26, 2001
First Named Inventor	Shahar, et al.
Group Art Unit	2637
Examiner Name	Tse, Young Toi
Total Number of Pages in This Submission	13
Attorney Docket Number	353600.00901

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Doyle B. Johnson (Reed Smith, LLP)  
Registration No. 39,240

Signature



Date

April 25, 2007

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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

510.

Complete If Known

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METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)											
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE															
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Independent Claims	6		= 0	X 100.	= 0										
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Name (Print/Type)	Doyle Burdickson	Registration No. (Attorney/Agent)	39,249	Telephone	415-659-9968
Signature				Date	April 25, 2007

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